

No Pills — No Potions

THE POSITIVE WEIGHT LOSS APPROACH

Once you have made up your mind to lose weight, you should make that commitment and go into it with a positive attitude. We all know that losing weight can be quite a challenge. In fact, for some, it can be downright tough. It takes time, practice and support to change lifetime habits. But it's a process you must learn in order to succeed. You and you alone are the one who has the power to lose unwanted pounds.



No Fads No Lotions No Pills No Potions

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Sensible Diet Tips

Begin your diet regimen with a food diary, record everything you eat, what you were doing at the time, and how you felt. That tells you about yourself, your temptation, the emotional states that encourage you to snack and may help you lose once you see how much you eat.

Instead of eating the forbidden piece of candy, brush your teeth. If you're about to cheat, allow yourself a treat, then eat only half a bite and throw the other half away.

When hunger hits, wait 10 minutes before eating and see if it passes. Set attainable goals. Don't say, "I want to lose 50 pounds." Say, "I want to lose 5 pounds a month." Get enough sleep but not too much.

Try to avoid sugar. Highly sweetened foods tend to make you crave more.

Drink six to eight glasses of water a day. Water itself helps cut down on water retention because it aids as a diuretic. Taken before meals, it dulls the appetite by giving you that "full feeling." Diet with a buddy. Support groups are important, and caring people can help one another succeed. Start your own, even with just one other person.

Substitute activity for eating. When the cravings hit, go to the "Y' or health club if possible; or dust, or walk around the block This is especially helpful if you eat out of anger.

If the pie on the counter is just too great a temptation and you don't want to throw it away, freeze it. If you're a late-night eater, have a carbohydrate, such as a slice of bread or a cracker, before bedtime to cut down on cravings. Keep an orange slice or a glass of water by your bed to quiet the hunger pangs that wake you up.

If you use food as a reward, establish a new reward system. Buy yourself a non-edible reward. Write down everything you eat—everything—including what you taste when you cook. If you monitor what you eat, you can't go off your diet.

Weigh yourself once a week at the same time. Your weight fluctuates constantly and you can weigh more at night than you did in the morning, a downer if you stuck to your diet all day. Make dining an event. Eat from your own special plate, on your own special placemat, and borrow the Japanese art of food arranging to make your meal, no matter how meager, look lovely. This is a trick that helps chronic over-eaters and bingers pay attention to their food instead of consuming it unconsciously.

Don't shop when you're hungry. You'll only buy more fattening food. Avoid finger foods that are easy to eat in large amounts. Avoid consum-

ing large quantities of fattening liquids, which are so easy to overdo. And this includes alcoholic beverages.

Keep plenty of crunchy foods like raw vegetables and air-popped fat-free popcorn on hand, They're high in fiber, satisfying and filling. Leave something on your plate, even if you are a charter member of the Clean The Plate Club. It's a good sign that you can stop eating when you want to, not just when your plate is empty.

Lose weight for yourself, not to please your husband, your parents or your friends. Make the kitchen off-limits at anytime other than mealtime. Always eat at the table, never in front of the TV set or with the radio on. Concentrate on eating every mouthful slowly and savoring each morsel. Chew everything from 10 to 20 times and count! Never skip meals. Carbohydrates, such as a slice of bread or a cracker, before bedtime to cut down on cravings.

The Positive Weight Loss Approach

Once you have made up your mind to lose weight, you should make that commitment and go into it with a positive attitude. We all know that losing weight can be quite a challenge. In fact, for some, it can be downright tough. It takes time, practice and support to change lifetime habits. But it's a process you must learn in order to succeed. You and you alone are the one who has the power to lose unwanted pounds.

Think like a winner, and not a loser - - remember that emotions are like muscles and the ones you use most grow the strongest. If you always look at the negative side of things, you'll become a downbeat, pessimistic person. Even slightly negative thoughts have a greater impact on you and last longer than powerful positive thoughts

Negative thinking doesn't do you any good, it just holds you back from accomplishing the things you want to do. When a negative thought creeps into your mind, replace it reminding yourself that you're somebody, you have self-worth and you possess unique strengths and talents.

Contemplate what lies ahead of you. Losing weight is not just about diets. It's about a whole new you and the possibility of creating a new life for yourself. Investigate the weight loss programs that appeal to you and that you feel will teach you the behavioral skills you need to stick with throughout the weight-loss process.

First you should look for support among family and friends. It can be an enormous help to discuss obstacles and share skills and tactics with others on the same path. You might look for this support from others you know who are in weight loss programs and you can seek guidance from someone you know who has lost weight and kept it off.

There are success stories across the coun-

try today. On television and in newspapers, magazines and tabloids about people who have miraculously lost untold pounds and kept it off. In all instances they say their mental attitude as well as their outlook on life has totally changed.

Diets and weight loss programs are more flexible now than they once were and there are many prepared foods already portioned out. 'They are made attractive and can be prepared in a matter of minutes. Low-fat and low-calorie foods are on shelves everywhere.

You will probably need to learn new, wiser eating skills. You will want a weight loss regimen that gives you some control, rather than imposing one rigid system. Look for one that offers a variety of different eating plans, so you can choose the one that's best for you.

Keep in mind, too, that your weight loss program will most likely include some physical exercises. Look at the exercising aspect of your program as fun and recreation and not as a form of grueling and sweaty work. The fact is that physical fitness is linked inseparably to all personal effectiveness in every field.

Anyone willing to take the few simple steps that lie between them and fitness will shortly begin to feel better, and the improvement will reflect itself in every facet of their existence.

Doctors now say that walking is one oft he best exercises. It helps the total circulation of

blood throughout the body, and thus has a direct effect on your overall feeling of health. There are things such as aerobics, jogging, swimming and many other exercises which will benefit a weight loss program.

Discuss the options with your doctor and take his advice in planning your exercise and weight loss program.

Walking And Weight Loss

Three universal goals most of us share are: to live longer, to live free of illness and to control our weight. Interesting enough, normal walking lets us achieve all three.

In fact, walking may be man's best medicine for slowing the aging process. First, it works almost every muscle in the body, improving circulation to the joints and massaging the blood vessels (keeping them more elastic). Walking also helps us maintain both our muscle mass and metabolism as we age. It also

keeps us young in spirit. For anyone out of shape or unathletically inclined, walking is the nodress, no-sweat answer to lifelong conditioning.

All it takes is a little time, common sense and a few guidelines. Unfortunately, there's a lot of misinformation floating around regarding fitness walking, weight-loss and dieting.

Walking is one of the best exercise for strengthening bones, controlling weight, toning the leg muscles, maintaining good posture and

improving positive self-concept.

People who diet without exercising often get fatter with time. Although your weight may initially drop while dieting, such weight loss consists mostly of water and muscle. When the weight returns, it comes back as fat. To avoid getting fatter overtime, increase your metabolism by exercising daily.

To lose weight, it's more important to walk for time than speed. Walking at a moderate pace yields longer workouts with less soreness--leading to more miles and more calories spent on a regular basis.

High-intensity walks on alternate days help condition one's system. But in a waking, weightloss program, it's better to be active every day. This doesn't require walking an hour every day. The key is leading an active life-style 365 days a year. When it comes to good health and weight loss, exercise and diet are interrelated. Exercising without maintaining a balanced diet is no more beneficial than dieting while remaining inactive.

The national research council recommends eating five or more servings of fruits and vegetables a day. Fruits and vegetables are the ideal diet foods for several reasons. They're relatively low in fat and calories, yet are often high in fiber and rich in essential vitamins and minerals.

Remember that rapid weight-loss consists

mostly of water and muscle - - the wrong kind of weight to lose. To avoid this, set more reasonable goals, such as one pound per week.

Carbohydrates are high-octane fuel. They provide energy for movement and help raise internal body metabolism. They're also satisfying. The key is not adding high-fat toppings to your carbohydrates.

It's everyday habits which define our weight and body composition. A three- minute walk after each meal is worth four pounds less body fat annually. Two flights of stairs a day burns off half a pound of body fat in a year. On the other hand, one candy bar eaten daily will cost you 20 pounds annually and require walking an hour every day.

Exercise Melts Body Fat

If you want to reduce your body fat, focus on increasing the amount of exercise you get rat her than decreasing your food intake. A recent national study was done using two groups of sedentary men, one group in their 20's and the other over age 65. A lot was learned from this accumulated data and it is interesting to note that there was a significant relationship between lack of physical activity and fat.

Not surprisingly, the most sedentary men had the most body fat. These studies have also indicated that the governments current recommended daily allowance for calories does not

correlate with the body's actual energy needs. For example, although 2400 calories have been calculated for older men, they in fact burned an average of 2800 calories daily.

The leading experts now recommend that people who want to lose weight should increase their physical activity. Just being more active in general (such as climbing the stairs instead of taking the elevator, moving around instead of sitting still, sitting up instead of lying down as well as showing some excitement and enthusiasm instead of boredom), are things that more effectively burns calories and reduces body fat. Everyone seems to have lost sight of the value of being active. Consider this, a half-hour aerobic workout accounts for far less energy expenditure than our minute-to-minute movement in the office or at home.

Millions of Americans are trying to lose weight, spending approximately \$30 billion a year on diet programs and products, often they do lose some weight. But, if you check with the same people five years later, you will find that nearly all have regained whatever weight they lost. A national panel recently sought data to determine if any commercial diet program could prove long-term success. Not a single program could do so.

Being seriously overweight and particularly obesity predisposes individuals to a num-

ber of diseases and serious health problems, and it's now a known fact that when caloric intake is excessive, some of the excess frequently is saturated fat.

People who diet without exercising often get fatter with time. Although your weight may initially drop while dieting, such weight loss consists mostly of water and muscle. When the weight returns, it comes back as fat. To avoid getting fatter over time, increase your metabolism by exercising regularly.

Walking is one of the best exercises for strengthening bones, controlling weight, toning the leg muscles, maintaining good posture and improving positive self-concept.

To lose weight, it's more important to walk for time than speed. Walking at a moderate pace yields longer workouts with less soreness-leading to more miles and more fat worked off on a regular basis.

High intensity walks on alternate days help condition one's system. But in a walking, weightloss program, you are not required to walk an hour every day as some people would have you believe.

When it comes to good health and weight loss, exercise and diet are interrelated. Exercising without maintaining a balanced diet is no more beneficial than dieting while remaining inactive.

Where Diets Go Wrong

When we discover that we are heavier than we want to be, we have a natural inclination to eat less food. We may skip lunch or eat only a tiny amount of our dinner in the hope that if we eat less our body will burn off some of its fat. But that is not necessarily true. Eating less actually makes it more difficult to lose weight.

Keep in mind that the human body took shape millions of years ago, and at that time there were diets.

The only low-calorie event in people's lives was starvation. Those who could cope with a temporary lack of food were the ones who survived. Our bodies, therefore, have developed this built-in mechanism to help us survive in the face of low food intake.

When researchers compare overweight and thin people, they find that they eat roughly the same number of calories. What makes overweight people different is the amount of fat that they eat.

Thin people tend to eat less fat and more complex carbohydrates.

Losing weight is not something one can do overnight. A carefully planned weight loss program requires common sense and certain guidelines. Unfortunately, there's a lot of misinformation floating around and lots of desperate people are easily duped and ripped off.

Every day one can open a magazine or newspaper and see advertisements touting some new product, pill or patch that will take excess weight off quickly. Everyone seems to be looking for that "magic" weight loss pill. Millions of Americans are trying to lose weight, spending billions of dollars every year on diet programs and products Often they do lose some weight. But, if you check with the same people five years later, you will find that nearly all have regained whatever weight they lost.

A survey was done recently to try and determine if any commercial diet program could prove long-term success. Not a single program could do so. So rampant has the so-called diet industry become with new products and false claims that the FDA has now stepped in and started clamping down.

Being seriously overweight and particularly obesity can develop into a number of diseases and serious health problems, and it is now a known fact that when caloric intake is excessive, some of the excess frequently is saturated fat.

The myth is that people get heavy by eating too many calories. Calories are a consideration it's true, but overall they are not the cause of obesity in America today. Americans actually take in fewer calories each day than they did at the beginning of the century. If calories alone

were the reason we become overweight, we should all be thin. But we are not. Collectively, we are heavier than ever. Partly, it is because we are more sedentary now. But equally as important is the fact that the fat content of the American diet has changed dramatically.

People who diet without exercising often get fatter with time. Although your weight may initially drop while dieting, such weight loss consists mostly of water and muscle. When the weight returns, it comes back as fat. To avoid getting fatter over time, increase your metabolism by exercising regularly.

Select an exercise routine that you are comfortable with and remember that walking is one of the best and easiest exercises for strengthening your bones, controlling your weight and toning your muscles.

Eating for Life

Eat for life? Eat to improve your chances for a long and healthy life? Yes, you can.

At a time when we seem to be overwhelmed by conflicting diet and health messages, the National Cancer institute (NCI) and the National Heart, Lung, and Blood institute (NHLBI) have some good news: by making the right food choices, you may reduce your risk of developing cardiovascular disease and cancer.

These diseases take the lives of more Americans than all other illnesses and causes of

death combined. Each day, about three out of every four deaths in the United Sates will occur as a result of cardiovascular disease or heart disease (like heart attacks and strokes) and cancer. This need not be.

Although no diet can ensure you won't get a heart attack, stroke or cancer, what you eat can affect your health. This has been shown by research of the National Cancer Institute and the National Heart, Lung, and Blood Institute (two of this country's National institutes of Health), along with the research of other scientists.

How does a person eat for life? It's easier and more enjoyable than you might think. The practical ideas in this booklet show you how to make healthful, tasty, and appetizing food choices at home and when you're eating out. They are consistent with the Dietary Guidelines for Americans, published by the U.S Department of Agriculture and the U.S Department of Health and Human Services. These seven basic guidelines are:

- * Eat a variety of foods.
- * Maintain desirable weight.
- * Avoid too much fat, saturated fat, and cholesterol.
 - * Eat foods with adequate starch and fiber.
 - * Avoid too much sugar.
 - * Avoid too much sodium.
 - * If you drink alcoholic beverages, do so in

moderation.

The first two guidelines form the framework of a good diet: eat a variety of foods so that you get enough of the essential nutrients you need, and eat only enough calories to maintain desirable weight.

The next five guidelines describe special characteristics of a good diet: getting adequate starch and fiber and avoiding too much fat, sugar, sodium, and alcohol. Although the guidelines are designed for healthy adult Americans, these suggestions are considered especially appropriate for people who may already

have some of the risk factors for chronic diseases. These risk factors include a family history of obesity, premature heart disease, diabetes, high blood pressure, or high blood cholesterol levels.

This pamphlet focuses on five guidelines that are particularly related to the prevention of heart disease and/or cancer: eat a variety of foods; maintain desirable weight; avoid too much fat, saturated fat, and cholesterol; eat foods with adequate starch and fiber; and avoid too much sodium.

Keep in mind that staying healthy requires more than just good nutrition. Regular exercise, getting enough rest, learning to cope with stress, and having regular physical checkups are important ways to help ensure good health. Checkups

are especially important for early detection of cancer and heart disease. Another important way to reduce your risks of heart disease and cancer is not to smoke or use tobacco in any form.

Controlling high blood pressure (hypertension) can also greatly reduce your risk of heart disease and stroke. Remember, three of the major risk factors for heart disease are largely under your control. They are smoking, high blood pressure, and high blood cholesterol.

How Do Foods We Eat Affect Our Chances of Getting Cancer and Heart Disease?

There is much still to be learned about the relationship between the foods we eat and our risk of getting cancer and heart disease. The NHLBI and NCI are conducting a great deal of research to find out more about this relationship. There is, however, a lot that we know now. The relationship of diet to cancer and the relationship of diet to risk factors for heart disease are summarized below:

Obesity

* We know that obesity is associated with high blood pressure, high blood cholesterol, diabetes, heart disease, and stroke, Extreme obesity has also been linked to several cancers. This means that if you are obese, losing weight may reduce your chances of developing these serious diseases or conditions. If you already suffer from hypertension and are overweight, weight loss

alone can often lower your blood pressure to normal levels. Because fat (both saturated and unsaturated fat) provides more than twice the number of calories provided by equal weights of carbohydrate or protein, decreasing the fat in your diet may help you lose weight as well as help reduce your risk of cancer and heart disease. Today, most Americans get about 37 percent of their daily calories from fat. Many experts suggest that fat should be reduced to 30 percent or less of calories.

Heart Disease

* We know that high blood cholesterol increases your risk of heart disease, especially as it rises above 200 mg/dl (milligrams of cholesterol per deciliter of blood). The evidence is clear that elevated cholesterol in the blood, resulting in part from the foods we eat and in part from cholesterol made in the body, contributes to the development of atherosclerosis, a disorder of arteries that results in their narrowing and in reduced blood circulation. This condition can lead to a heart attack or stroke.

*We know that blood cholesterol levels are greatly influenced by the amount of saturated fat and cholesterol found in many of the foods we eat. These raise blood cholesterol levels. (Of the two, saturated fat seems to be the major dietary factor which affects blood cholesterol.) To reduce your blood cholesterol level, it is important to eat less

saturated fat and cholesterol. Saturated fat and cholesterol are often found together in foods. Saturated fat in the U.S diet is provided primarily by animal products such as the fat in meat, butter, whole milk, cream, cheese, and ice cream. There are a few vegetable fats—coconut oil, cocoa butter, palm kernel and palm oils which are also high in saturated fat. Cholesterol is found only in animal products, eggs, meat, poultry, fish and dairy products. Plant foods such as vegetables, grains, cereals, nuts, and seeds do not contain cholesterol. A few foods are high in cholesterol but relatively low in fat—for example, egg yolks and liver.

Watch out for items in the grocery store that are labeled no cholesterol or, contains no animal fat."

They may still contain a large amount of fat or saturated fat. Examples are peanut butter, solid vegetable shortening, nondairy creamer, and baked products like cookies, cakes, and crackers. For people trying to lose blood cholesterol level, these foods should be chosen less often.

* We know that substituting unsaturated fatty acids (which are usually liquid and usually come from plant sources) for saturated fats can help reduce high blood cholesterol. Safflower, corn, soybean, olive, and canola oils are major sources of unsaturated fats. The omega-3 fatty acids which are found in fish and seafood, may

have a favorable effect on blood fat and reduce the risk of heart disease. No one is sure yet.

* We know that there is an association between too much sodium in the diet and high blood pressure in some individuals. Sodium is a mineral that occurs naturally in some foods and is added to many foods and beverages as salt or other additives. Most sodium in the American diet comes from salt. One teaspoon of salt contains about 2 grams of sodium. In countries where people eat only small amounts of sodium, high blood pressure is rare. We also know that when some people with high blood pressure greatly reduce their sodium intake, their blood pressure will fall. Because Americans generally eat much more sodium than they need, it is probably best for most people to reduce the amount of sodium they eat. According to the National Academy of Sciences, a safe and adequate amount of sodium in the diet of the average adult is between 1 and 3.3 grams daily.

Some recent studies indicated that the substitution of monosaturated fats, such as those saturated fats may lower blood cholesterol.

Cancer

- * The National Cancer institute estimates that about 80 percent of all cancers may be related to smoking, diet, and the environment.
- * The National Cancer Institute estimates that about one-third of all cancer deaths may be

related to the foods we eat. Studies at the National Cancer Institute suggest that eating foods high in fiber may reduce risks of cancers of the colon and rectum. Adult Americans now eat about 11 grams of fiber daily according to NCI studies. NCI recommends that Americans increase the daily amount of fiber they eat to between 20 and 30 grams, with an upper limit of 35 grams. The NCI also emphasizes the importance of choosing fiber rich foods, not supplements. Good sources of fiber are whole grain breads and bran cereals, vegetables, cooked dry peas and beans, and fruits.

* We know that diets high in fats of all kinds have been linked to certain cancers, particularly those of the breast, colon, lining of the uterus, and prostate gland. Same studies have suggested that fat may act as a cancer promoter (an agent that speeds up the development of cancer).

* There is some evidence that diets rich in vitamin A, vitamin C, and beta-carotene (the plant form of vitamin A) may help reduce the risk of certain cancers. The evidence we have about vitamins A and C comes from studies of these vitamins as they are found in foods. That is why NCI recommends that you eat a variety of foods rich in vitamins rather than relying on vitamin supplements. Good sources of vitamin A include yelloworange vegetables such as carrots, winter squash, sweet potatoes and pumpkin; an yellow-orange

fruits such as peaches, cantaloupes and mangoes. Sources of vitamin C include dark green leafy vegetables such as kale, spinach and watercress; broccoli and asparagus, and tomatoes. Some fruit sources of vitamin C are oranges, lemons, grapefruit, peaches, berries and cantaloupe.

* There is some evidence that vegetables in the cabbage family may help protect against cancer of the colon. These vegetables are also good sources of fiber, vitamins, and minerals. Cabbage family vegetables include cabbage, broccoli, cauliflower, Brussels sprouts, collards, kale, turnips, mustard greens, turnip greens, kohlrabi, watercress and radishes.

Reducing Your Risk Of Heart Disease And Cancer

Based on what we know, the National Heart, Lung, and Blood Institute and the National Cancer Institute have joined together to suggest some ways you may reduce your risks of heart disease and cancer. These suggestions emphasize the need to eat a variety of foods each day. They also include some "mealtime strategies' that you can use to plan meals that avoid too much fat, saturated fat, cholesterol, and sodium, and that help you to get adequate starch and fiber. These strategies are consistent with the Department of Agriculture and Department of Health and Human Services Dietary Guidelines for Americans. These strategies should encourage you to think about

the foods you eat, how to prepare them, and what food choices you can make when you go grocery shopping or eat away from home.

The key is following a Choose More Often approach. It doesn't mean giving up your favorite foods. It means taking steps to choose more often foods that are low in fat and high in fiber. For example, if you enjoy eating steak, choose a low-fat cut such as round steak, trim off the excess fat, broil it, and drain off the drippings. Pizza? To try a low-fat version that is rich in fiber, use a whole-grain English muffin or pita bread topped with part-skim mozzarella, fresh vegetables, and tomato sauce. And cookies or other desserts? In many recipes you can reduce the fat, and substitute vegetable oils or margarine for butter.

To increase fiber, use whole wheat flour in place of white flour.

Here's how the Choose More Often approach works:

Choose More Often:

Low-fat meat, poultry, fish; lean cuts of meat trimmed of fat (round tip roast, pork tenderloin, loin lamb chop), poultry without skin, and fish, cooked without breading or fat added.

Low-fat dairy products

l percent or skim milk, buttermilk; low-fat or nonfat yogurt; lower fat cheeses: part-skim ricotta, pot, and farmer); ice milk, sherbet.

Dry beans and peas

All beans, peas and lentils-the dry forms are higher in protein.

Whole grain products

Breads, bagels, and English muffins made from whole wheat, rye, bran, and corn flour or meal; whole grain or bran cereals; whole wheat pasta; brown rice; bulgur.

Fruits and vegetables

All fruits and vegetables (except avocados, which are high in fat, but that fat is primarily unsaturated).

For example, apples, pears, cantaloupe, oranges, grapefruit, pineapple, peaches, bananas, carrots, broccoli, Brussels sprouts, cabbage, Kale, potatoes, tomatoes, sweet potatoes, spinach, cauliflower, and turnips, and others.

Fats and oils high in unsaturates

Unsaturated vegetable oils, such as canola oil, corn oil, cottonseed oil, olive oil, and soybean oil, and margarine; reduced-calorie mayonnaise and salad dressings.

To assure an adequate diet, choose a variety of foods daily including selections of vegetables; fruits; whole-grain breads and cereals; low-fat dairy products; poultry, fish, and lean meat, dry beans and peas.

Here are some tips for following the Choose More Often approach in three important areas: grocery shopping, food preparation, and eating out.

Grocery Shopping

Focus on variety. Choose a wide selection of low-fat foods rich in fiber. Include whole grain breads and cereals, vegetables, fruits, low-fat dairy products, and poultry, fish, and lean meat. Although the goal is to reduce fat to 30 percent or less of calories, when choosing foods that do contain fat, try to choose ones that contain primarily unsaturated fats. For example, choose an unsaturated-rich margarine instead of butter; choose vegetable oils.

Read food labels. To help you find foods that are low in fat and cholesterol and high in fiber, get into the label-reading habit. Many nutritional labels on packaged foods show the amount of unsaturated and saturated fatty acids and the amount of cholesterol and fiber they contain. Check the type of fat on the ingredients list. Is it an animal fat, coconut or palm kernel oil high in saturated fat? Or, is it corn or soybean oil high in polyunsaturated fat? Choose a product with the lowest proportion of saturated fat.

The label also tells you something else about a product. Ingredients are listed in order of amount from most to least by weight. When you buy a breakfast cereal, for example, choose one that has a whole grain listed first (such as whole wheat or oatmeal).

Pay attention to sodium. Many processed, canned, and frozen foods are high in sodium.

Cured or processed meats, cheeses, and condiments (soy sauce, mustard, tartar sauce) are also high in sodium.

Check for salt, onion or garlic salt, and any ingredient with "sodium" on the label. If the sodium content is given on the nutritional label, compare products and choose the ones with lower levels.

Food Preparation

Use small amounts of fat and fatty foods. There are lots of ways to use less fat. For example, when you saute or stir-fry, use only 1/2 teaspoon of fat per serving. When you use margarine, mayonnaise, or salad dressing, use half as much as usual. And, decrease portion sizes of other high fat foods-rich desserts, untrimmed and fatty types of meat, poultry with skin, and fried foods, especially breaded foods.

Use less saturated fat. While reducing your total fat intake, substitute unsaturated fat and oils for saturated fat in food preparation. For example, instead of butter, use margarine or vegetable oil. One teaspoon of butter can be replaced with equal portions (or less) of margarine or 1/2 teaspoon of vegetable oil in many recipes without affecting the quality. Saturated fat may be reduced even more if you want to experiment with recipes. Poultry without skin and fish are good choices because they are often lower in fat and saturated fat than many meats.

Use low-fat alternatives. Substitute 1 percent, skim, or reconstituted nonfat dry milk for whole milk.

Use low-fat yogurt, buttermilk, or evaporated skim milk in place of cream or sour cream. Try reduced-calorie mayonnaise and salad dressing in place of regular.

Choose lean meat. When you buy meat, choose lean cuts such as beef round, pork tenderloin, and loin lamb chops. Be sure to trim all visible fat from meat and poultry and remove poultry skin.

Use low-fat cooking methods. Bake, steam, broil, microwave, or boil foods rather than frying. Skim fat from soups and gravies.

Increase fiber. Choose whole grain breads and cereals. Substitute whole grain flour for white flour.

Eat vegetables and fruits more often and have generous servings. Whenever possible, eat the edible fiber-rich skin as well as the rest of the vegetable or fruit.

Use herbs, spices, and other flavorings. For a different way to add flavor to meals, try lemon juice, basil, chives, allspice, onion, and garlic in place of fats and sodium. Try new recipes that use less fat or sodium-containing ingredients, and adjust favorite recipes to reduce fat and sodium.

Eating Out

Choose the restaurant carefully. Are there low-fat as well as high-fiber selections on the menu? Is there a salad bar? How are the meat, chicken, and fish dishes cooked? Can you have menu items broiled or baked without added fat instead of fried? These are important things to know before you enter a restaurant—fast food or otherwise. Seafood restaurants usually offer broiled, baked, or poached fish, and you can often request butter and sauces on the side. Many steak houses offer small steaks and have salad bars.

Try ethnic cuisines. Italian and Asian restaurants often feature low-fat dishes,

though you must be selective and alert to portion size. Try a small serving of pasta or fish in a tomato sauce at an Italian restaurant. Many Chinese, Japanese, and Thai dishes include plenty of steamed vegetables and a high proportion of vegetables to meat. Steamed rice, steamed noodle dishes, and vegetarian dishes are good choices too. Ask that the chef cook your food without soy sauce or salt to decrease sodium. Many Latin American restaurants feature a variety of fish and chicken dishes that are low in fat.

Make sure you get what you want. Here are just a few things you can do to make sure you're in control when you eat out. Ask how dishes are cooked. Don't hesitate to request that one food

be substituted for another. Order a green salad or baked potato in place of french fries or order fruit, fruit ice, or sherbet instead of ice cream. Request sauces and salad dressings on the side and use only a small amount. Ask that butter not be sent to the table with your rolls. If you're not very hungry, order two low-fat appetizers rather than an entire meal, split a menu item with a friend, get a doggie-bag to take half of your meal home, or order a half-size portion. When you have finished eating, have the waiter clear the dishes away so that you can avoid postmeal nibbling.

Mealtime Strategies

We've given you some basic information on fat, fiber, and sodium. And, we've provided some tips on decreasing fat, saturated fat, cholesterol and sodium; and increasing fiber. But, how do you put it all together when it comes to breakfast, lunch, and dinner? These mealtime strategies should help.

Breakfast

Strategy #1—Choose fruit more often. Just a few great choices in the fruit family are: cantaloupe, grapefruit, strawberries, oranges, bananas, pears, and apples.

Strategy #2—Choose whole-grain cereals and products more often. Examples are whole wheat or bran breads, bagels, and cereal.

Strategy #3—Try making pancakes and waffles with whole wheat flour instead of white

flour and one whole egg and one egg white rafter than two whole eggs. For a low-fat topping with fiber, try applesauce, apple butter and cinnamon, or fruit and low-fat plain yogurt.

Strategy #4—Fruit juice and skim milk are familiar breakfast drinks. For an extra treat in the morning, why not try a fruit smoothie made from juice, fruit and nonfat plain yogurt blended together. Other nonfat choices are seltzer water, coffee, and tea.

These breakfast choices are sound nutrition choices because they are not only low in fat and cholesterol but also provide fiber, vitamins, and minerals. Same foods that you should choose less often are sausage, bacon, butter, whole milk and cream (including commercial nondairy creamer). These foods are high in saturated fat and cholesterol.

Lunch

Strategy #1—Try a fiber-rich bean, split pea, vegetable, or minestrone soup. Use commercially canned and frozen soups and cream soups less often—they can be high in sodium and fat. If you make your own soup, use broth or skim milk to keep the fat content low.

Strategy #2—Have a bean salad or mixed greens with plenty of vegetables. For fiber include some vegetables like-carrots, broccoli, cauliflower, and kidney or Garbanzo beans. For a low-fat dressing, try lemon juice or a reduced-

calorie dressing. If you use regular dressing, use only a very small amount.

Strategy #3—Try sandwiches made with water-packed tuna, sliced chicken, turkey, lean meat, or low-fat cheese, and use whole-grain bread or pita bread. To decrease fat, use reduced-calorie mayonnaise, or just a small amount of regular mayonnaise, or use mustard. Mustard contains no fat.

Strategy #4—For dessert, have fresh fruit, low-fat yogurt, or e frozen fruit bar.

Strategy #5—Fruit juice and skim milk are good beverage choices. Club soda with a twist of lemon or lime, hot or iced tea with lemon, or coffee without cream are refreshing drinks.

At lunch, try to eat these foods less often: processed luncheon meats, fried meat, chicken, or fish; creamy salads, french fries and chips, richer creamy desserts, high-fat baked goods, and high-fat cheeses such as Swiss, cheddar, American, and Brie.

Dinner

Strategy #1—Eat a variety of vegetables. To increase variety, try some that might be new to you, such as those from the cabbage family (broccoli, Brussels sprouts, cauliflower, and cabbage), dark-green leafy vegetables (spinach and kale), and yellow-orange vegetables (winter squash and sweet potatoes). For old favorites, like peas and green beans, skip the butter and

sprinkle with lemon juice or herbs. Or, how about a baked potato, with the skin, and topped with low-fat yogurt and chives, tomato salsa, or a small amount of low-fat cheese?

Strategy #2—Try whole wheat pasta and Casseroles made with brown rice, bulgur, and other grains. If you are careful with preparation, these dishes can be excellent sources of fiber and low in fat. For example, when milk and eggs are ingredients in a recipe, try using 1 percent or skim milk, reduce the number of egg yolks and replace with egg whites. Here are some ideas for grain-based dishes:

- —Whole wheat spaghetti with fresh tomato sauce:
- —Whole wheat macaroni and chickpea stew in tomato sauce:
- —Tuna noodle casserole, using waterpacked tuna (or rinsed, oil-packed tuna), skim milk, and fresh mushrooms or sliced water chestnuts;
- —Turkey, broccoli and brown rice casserole using skim milk and egg whites;
- —Eggplant lasagna, made with broiled eggplant and part-skim mozarella or ricotta cheese.

Strategy #3—Substitute whole-grain breads and rolls for white bread.

Strategy #4—Choose main dishes that call for fish, chicken, turkey or lean meat. Don't for-

get to remove the skin and visible fat from poultry and trim the fat from meat. Same good low-fat choices are:

- —Red snapper stew;
- —Flounder or sole Florentine (make the cream sauce with skim milk);
- —Salmon loaf (use skim milk, rolled oats, and egg whites);
 - -Baked white fish with lemon and fennel;
- —Chicken Cacciatore Italian-style (decrease the oil in the recipe);
- —Chicken curry served over creamed wild rice (choose a recipe that requires little or no fat; "saute" the onions in chicken broth instead of butter);
- —Light beef Stroganoff with well-trimmed beef round steak and buttermilk served over noodles;
- —Oriental pork made with lean pork loin, green peppers and pineapple chunks served over rice.

Strategy #5—Choose desserts that give you fiber but little fat such as:

- —Baked apples or bananas, sprinkled with cinnamon:
 - -Fresh fruit cup;
- —Brown bread or rice pudding made with skim milk;
- —Oatmeal cookies (made with margarine or vegetable oil; add raisins).

For many, the end of the workday, represents a time to relax, and dinner can be a light meal and an opportunity to decrease fat and cholesterol.

Snacks

Strategy #1—Try a raw vegetable platter made with a variety of vegetables. Include some good fiber choices: carrots, snow peas, cauliflower, broccoli, green beans.

Strategy #2—Make sauces and dips with nonfat plain yogurt as the base.

Strategy #3—Eat more fruit. Oranges, grapefruit, kiwi, apples, pears, bananas, strawberries and cantaloupe are all good fiber sources. Make a big fruit salad and keep it on hand for snacks.

Strategy #4—Plain, air-popped popcorn is a great low-fat snack with fiber. Watch out! Some prepackaged microwave popcorn has fat added. Remember to go easy on the salt or use other seasonings.

Strategy #5—Instead of chips, try one of these low-fat alternatives that provide fiber: toasted shredded wheat Squares sprinkled with a small amount of grated Parmesan cheese, whole-grain English muffins, or toasted plain corn tortillas.

Strategy #6—When you are thirsty, try water, skim milk, juice, or club soda with a twist of lime or lemon.

The National Heart, Lung, and Blood Institute and the National Cancer Institute are committed to promoting good health and reducing the loss of life from heart disease and cancer. You can help. By using the ideas in this booklet, trying recipes that have been modified to decrease fat and sodium and increase fiber, and planning menus that are high in fiber and low in fat, especially saturated fat, you may reduce the risk of these diseases for yourself and for those you love.

Eat Well, Eat Healthy... And Eat For Life!

A Consumer's Guide to Fats

Once upon a time, we didn't know anything about fat except that it made foods tastier. We cooked our food in lard or shortening. We spread butter on our breakfast toast and plopped sour cream on our baked potatoes. Farmers bred their animals to produce milk with high butterfat content and meat "marbled" with fat because that was what most people wanted to eat.

But ever since word got out that diets high in fat are related to heart disease, things have become more complicated. Experts tell us there are several different kinds of fat, some of them worse for us than others. In addition to saturated, monounsaturated and polyunsaturated fats, there are triglycerides, transfatty acids, and omega 3 and omega 6 fatty acids.

Most people have learned something about

cholesterol, and many of us have been to the doctor for a blood test to learn our cholesterol "number." Now, however, it turns out that there's more than one kind of cholesterol, too.

Almost every day there are newspaper reports of new studies or recommendations about what to eat or what not to eat: Lard is bad, olive oil is good, margarine is better for you than butter—then again, maybe it's not.

Amid the welter of confusing terms and conflicting details, consumers are often baffled about how to improve their diets.

FDA recently issued new regulations that will enable consumers to see clearly on a food product's label how much and what kind of fat the product contains. Understanding the terms used to discuss fat is crucial if you want to make sure your diet is within recommended guidelines (see accompanying article).

Fats and Fatty Acids

Fats are a group of chemical compounds that contain fatty acids. Energy is stored in the body mostly in the form of fat. Fat is needed in the diet to supply essential fatty acids, substances essential for growth but not produced by the body itself.

There are three main types of fatty acids: saturated, monounsaturated and polyunsaturated. All fatty acids are molecules composed mostly of carbon and hydrogen atoms. A satu-

rated fatty acid has the maximum possible number of hydrogen atoms attached to every carbon atom. It is therefore said to be "saturated" with hydrogen atoms.

Some fatty acids are missing one pair of hydrogen atoms in the middle of the molecule. This gap is called an "unsaturation" and the fatty acid is said to be "monounsaturated" because it has one gap. Fatty acids that are missing more than one pair of hydrogen atoms are called "polyunsaturated." Saturated fats (which contain saturated fatty acids) are mostly found in foods of animal origin.

Monounsaturated and polyunsaturated fats (which contain monounsaturated and polyunsaturated fatty acids) are mostly found in foods of plant origin and some sea foods. Polyunsaturated fatty acids are of two kinds, omega-3 or omega-6. Scientists tell them apart by where in the molecule the "unsaturations," or missing hydrogen atoms, occur.

Recently a new term has been added to the fat lexicon: transfatty acids. These are by-products of partial hydrogenation, a process in which some of the missing hydrogen atoms are put back into polyunsaturated fats. "Partially hydrogenated vegetable oils," such as vegetable shortening and margarine, are solid at room temperature.

Cholesterol

Cholesterol is sort of a "cousin" of fat. Both fat and cholesterol belong to a larger family of chemical compounds called lipids. All the cholesterol the body needs is made by the liver. It is used to build cell membranes and brain and nerve tissues. Cholesterol also helps the body produce steroid hormones needed for body regulation, including processing food, and bile acids needed for digestion.

People don't need to consume dietary cholesterol because the body can make enough cholesterol for its needs. But the typical U.S diet contains substantial amounts of cholesterol, found in foods such as egg yolks, liver, meat, some shell-fish, and whole-milk dairy products. Only foods of animal origin contain cholesterol.

Cholesterol is transported in the bloodstream in large molecules of fat and protein called lipoproteins.

Cholesterol carried in low-density lipoproteins is called LDL-cholesterol; most cholesterol is of this type.

Cholesterol carried in high-density lipoproteins is called HDL-cholesterol. (See "Fat Words.")

A person's cholesterol "number" refers to the total amount of cholesterol in the blood. Cholesterol is measured in milligrams per deciliter (mg/dl) of blood. (A deciliter is a tenth of a liter.)

Doctors recommend that total blood cholesterol be kept below 200 mg/dl. The average level in adults in this country is 205 to 215 mg/dl. Studies in the United States and other countries have consistently shown that total cholesterol levels above 200 to 220 mg/dl are linked with an increased risk of coronary heart disease. LDH cholesterol and HDL cholesterol ad differently in the body. A high level of LDL cholesterol in the blood increases the risk of fatty deposits forming in the arteries, which in turn increases the risk of a heart attack. Thus, LDL-cholesterol has been dubbed "bad" cholesterol.

On the other hand, an elevated level of HDl cholesterol seems to have a protective effect against heart disease. For this reason, HDL-cholesterol is often called "good" cholesterol.

In 1992, a panel of medical experts convened by the National Institute of Health (NIH) recommended that individuals should have their level of HDL-cholesterol checked along with their total cholesterol.

According to the National Heart, Lung, and Blood institute (NHLBI), a component of NIH, a healthy person who is not at high risk for heart disease and whose total cholesterol level is in the normal range (around 200 mg/dl) should have an HDL-cholesterol level of more than 35 mg/dl. NHLBI also says that an LDL-cholesterol level of less than 130 mg/dl is "desirable" to minimize the

risk of heart disease.

Some very recent studies have suggested that LDL-cholesterol is more likely to cause fatty deposits in the arteries if it has been through a chemical change known as oxidation. However, these findings are not accepted by all scientists.

The NIH panel also advised that individuals with high total cholesterol or other risk factors for coronary heart disease should have their triglyceride levels checked along with their HDL-cholesterol levels.

Triglycerides and VLDL

Triglyceride is another form in which fat is transported through the blood to the body tissues. Most of the body's stored fat is in the form of triglycerides. Another lipoprotein—very low-density lipoprotein, or VLDL—has the job of carrying triglycerides in the blood. NHLBI considers a triglyceride level below 250

mg/dl to be normal.

It is not clear whether high levels of triglycerides alone increase an individual's risk of heart disease. However, they may be an important clue that someone is at risk of heart disease for other reasons. Many people who have elevated triglycerides also have high LDL-cholesterol or low HDL-cholesterol.

People with diabetes or kidney disease—two conditions that increase the risk of heart disease—are also prone to high triglycerides.

Dietary Fat and Cholesterol Levels

Many people are confused about the effect of dietary fats on cholesterol levels. At first glance, it seems reasonable to think that eating less cholesterol would reduce a person's cholesterol level. In fact, eating less cholesterol has less effect on blood cholesterol levels than eating less saturated fat.

However, some studies have found that eating cholesterol increases the risk of heart disease even if it doesn't increase blood cholesterol levels.

Another misconception is that people can improve their cholesterol numbers by eating "good" cholesterol. In food, all cholesterol is the same. In the blood, whether cholesterol is "good" or "bad" depends on the type of lipoprotein that's carrying it.

Polyunsaturated and monounsaturated fats do not promote the formation of artery-clogging fatty deposits the way saturated fats do. Some studies show that eating foods that contain these fats can reduce levels of LDL-cholesterol in the blood. Polyunsaturated fats, such as safflower and corn oil, tend to lower both HDL- and l_DL-cholesterol. Edible oils rich in monounsaturated fats, such as olive and canola oil, however, tend to lower LDL-cholesterol without affecting HDL levels.

How Do We Know Fat Is A Problem?

In 1908, scientists first observed that rabbits fed a diet of meat, whole milk, and eggs developed fatty deposits on the walls of their arteries that constricted the flow of blood. Narrowing of the arteries by these fatty deposits is called atherosclerosis. It is a slowly progressing disease that can begin early in life but not show symptoms for many years. In 1913, scientists identified the substance responsible for the fatty deposits in the rabbits' arteries as cholesterol.

In 1916, Cornelius de Langen, a Dutch physician working in Java, Indonesia, noticed that native Indonesians had much lower rates of heart disease than Dutch colonists living on the island. He reported this finding to a medical journal, speculating that the Indonesians' healthy hearts were linked with their low levels of blood cholesterol.

De Langen also noticed that both blood cholesterol levels and rates of heart disease soared among Indonesians who abandoned their native diet of mostly plant foods and ate a typical Dutch diet containing a lot of meat and dairy products. This was the first recorded suggestion that diet, cholesterol levels, and heart disease were related in humans. But de Langen's observations lay unnoticed in an obscure medical journal for more than 40 years.

After World War II, medical researchers in Scandinavia noticed that deaths from heart disease had declined dramatically during the war, when food was rationed and meat, dairy products, and eggs were scarce. At about the same time, other researchers found that people who suffered heart attacks had higher levels of blood cholesterol than people who did not have heart attacks.

Since then, a large body of scientific evidence has been gathered linking high blood cholesterol and a diet high in animal fats with an elevated risk of heart attack. In countries where the average person's blood cholesterol level is less than 180 mg/dl, very few people develop arteriosclerosis or have heart attacks. In many countries where a lot of people have blood cholesterol levels above 220 mg/dl, such as the United States, heart disease is the leading cause of death.

High rates of heart disease are commonly found in countries where the diet is healthy with meat and dairy products containing a lot of saturated fats. However, high-fat diets and high rates of heart disease don't inevitably go hand-in-hand.

Learning from Other Cultures

People living on the Greek island of Crete have very low rates of heart disease even though their diet is high in fat. Most of their dietary fat comes from olive oil, a monounsaturated fat that tends to lower levels of "bad" LDL-cholesterol and maintain levels of "good" HDL-cholesterol.

The Inuit, or Eskimo, people of Alaska and Greenland also are relatively free of heart disease despite a high-fat, high- cholesterol diet. The staple food in their diet is fish rich in omega-3 polyunsaturated fatty acids.

Same research has shown that omega-3 fatty acids, found in fish such as salmon and mackerel as well as in soybean and canola oil, lower both LDL-cholesterol and triglyceride levels in the blood. Some nutrition experts recommend eating fish once or twice a week to reduce heart disease risk. However, dietary supplements containing concentrated fish oil are not recommended because there is insufficient evidence that they are beneficial and little is known about their long-term effects.

Omega-6 polyunsaturated fatty acids have also been found in some studies to reduce both LDI; and HDL-cholesterol levels in the blood. Linoleic acid, an essential nutrient (one that the body cannot make for itself) and a component of corn, soybean and safflower oil, is an omega 6 fatty acid.

At one time, many nutrition experts recommended increasing consumption of mono unsaturated and polyunsaturated fats because of their cholesterol-lowering effects. Now, however, the advice is simply to reduce dietary intake of all types of fat. (Infants and young children, however, should not restrict dietary fat.)

The available information on fats may be voluminous and is sometimes confusing. But sorting through the information becomes easier once you know the terms and some of the history.

The "bottom line" is actually quite simple, according to John E Vanderveen, PhD., director of the Office of Plant and Dairy Foods and Beverages in FDA's Center for Food Safety and Applied Nutrition. "What we should be doing is removing as much of the saturated fat from our diet as we can. We need to select foods that are lower in total fat and especially in saturated fat." In a nutshell, that means eating fewer foods of animal origin, such as meat and whole-milk dairy products, and more plant foods such as vegetables and grains.

Fat Words

Here are brief definitions of the key terms important to an understanding of the role of fat in the diet.

Cholesterol

A chemical compound manufactured in the body. It is used to build cell membranes and brain and nerve tissues. Cholesterol also helps the body make aneroid hormones and bile acids.

Dietary Cholesterol

Cholesterol found in animal products that are part of the human diet. Egg yolks, liver, meat, some shellfish, and whole-milk dairy products are all sources of dietary cholesterol.

Fatty acid

A molecule composed mostly of carbon and hydrogen atoms. Fatty acids are the building blocks of fats.

Fat

A chemical compound containing one or more fatty acids. Fat is one of the three main constituents of food (the others are protein and carbohydrate). It is also the principal form in which energy is stored in the body.

Hydrogenated Fat

A fat that has been chemically altered by the addition of hydrogen atoms (see transfatty acid). Vegetable oil and margarine are hydrogenated fats.

Lipid

A chemical compound characterized by the fact that it is insoluble in water. Both fat and cholesterol are members of the lipid family.

Lipoprotein

A chemical compound made of fat and protein. Lipoproteins that have more fat than protein are called low-density lipoproteins (LDLS). Lipoproteins that have more protein than fat are called high-density lipoproteins (HDls). Lipoproteins are found in the blood, where their main function is to carry cholesterol.

Monounsaturated Fatty Acid

A fatty acid that is missing one pair of hy-

drogen atoms in the middle of the molecule. The gap is called an "unsaturation." Monounsaturated fatty acids are found mostly in plant and sea foods.

Monounsaturated Fat

A fat made of monounsaturated fatty acids. Olive oil and canola oil are monounsaturated fats. Monounsaturated fats tend to lower levels of LDL-cholesterol in the blood. Polyunsaturated fatty acid: A fatty acid that is missing more than one pair of hydrogen atoms. Polyunsaturated fatty acids are mostly found in plant and sea foods.

Polyunsaturated Fat

A fat made of polyunsaturated fatty acids. Safflower oil and corn oil are polyunsaturated fats. Polyunsaturated fats tend to lower levels of both HDL-cholesterol and LDL-cholesterol in the blood.

Saturated Fatty Acid

A fatty acid that has the maximum possible number of hydrogen atoms attached to every carbon atom. It is said to be "saturated" with hydrogen atoms. Saturated fatty acids are mostly found in animal products such as meat and whole milk.

Saturated Fat

A fat made of saturated fatty acids. Butter and lard are saturated fats. Polyunsaturated fats tend to raise levels of LDL- cholesterol ("bad" cholesterol) in the blood. Elevated levels of LDL-cholesterol are associated with heart disease.

Trans Fatty Acid

A polyunsaturated fatty acid in which some of the missing hydrogen atoms have been put back in a chemical process called hydrogenation. Transfatty acids are the building blocks of hydrogenated fats.

Government Advice

Dietary guidelines endorsed by the U.S Department of Agriculture and the U.S Department of Health and Human Services advise consumers to:

Reduce total dietary fat intake to 30 percent or less of total calories.

Reduce saturated fat intake to less than 10 percent of calories.

Reduce cholesterol intake to less than 300 milligrams daily.